CLAIMS ONLY

Application Number Filling Date

Applicant(s)

CLAIM			SFILED		AFTE	R FIRST DMENT	AFTER SECOND		T	* May be used for additional			ms or ame	endments		~
	Ind	ер	Depen	1 1	ndep	Depend	Indep	DMENT	4						*.	~
						ээроли	muep	Depend			Indep	Depend	Indep	Don't	ļ	
2				$oldsymbol{ol}oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{ol}}}}}}}}}}}}}}$				 	-	51			таер	Depend	Indep	De
3			1					 	ł	52				 	 	1_
5	+	\leq	\rightarrow	1_				 	ł	53						
6	- 		<i>_</i>							54 55					ļ	┼~~
7				-						56	 					├
. 8		_		┥—					l	57						├
9	7		1							. 58	1			` .		
10			-17							59	-					<u> </u>
• 11	\geq			 						60						
12	*			1						61]					
13	1		4	1						62						
.14		\bot	1						1	63						
. 15 -16	1		7	$oxed{\Box}$					- 1	64	<u> </u>					
17				!						65 —66—	 					
18	 /	-		 					Ŧ	67						
19	1	\dashv	<u> </u>		-				h	68						
20				 	-+				-	- 69						
21]		70						
22	1									71						
23	ļ	<u> </u>	1						-	72				 -		
24 25	 -		1						_	73						
26				· ·					-	74 75						
27		- -							-	76						
28		-		· ——					-	77						
9		+							<u> </u>	78						
0		1-								79						
1		1			+					80						
2		1,								81					_	
3		1							-	82						
15	 -								-	83						
6		╁							-	84 85						
7		╂							-	86						
8		+-	-						-	87	 					
9	-	1								88						
0		1-]		89						
1		I^-			+-					90					_	
2					+-					91						
3					1					92						
					1					93						
		ļ	-							94						
5,		ļ								95 96						
-					\bot					96					_	
;					-					98						
-	 									99						
	7	 -			 					00						
,	61		1		11	1			Tota				 			
	104		<u> </u>			·			Inde	ep			11	. _	11	
nd)				_	1	▼		Tota		→				ا لڇـ	
	HT				T			.	Dep				~ —	1	4-	
ıs d	' 1 [ł	1	1	- 1 1	Tota Clair	ı						